

N24-04

ILLINOIS DEPARTMENT OF CORRECTIONS  
Offender Disciplinary Report

Type of Report:  
☒ Disciplinary    ☐ Investigative

Offender Name: Jose Nicolas ID #: R72153 Date: 2-5-14

Observation Date: 2-5-14 Approximate Time: 1130 ☐ a.m. ☐ p.m. Location: WCH

Offense(s): DR 504: 304 Insults 403 Disobeying Direct Order

Observation: (NOTE: Each offense identified above must be substantiated) on the above date and approx. time this Reporting Sgt had placed Jim Jose Nicolas in the 6am side holding cell for inmate Jose Nicolas continuously interfered with line movement (Rec, Commissary, Chow) as they went by Jim Jose Nicolas was told to stop and have a seat, to which he responded "Fuck That" Inmate Jose Nicolas was Cuffed and taken to N2 Seg. Lt Payne and Major Thomas Notified Inmate held by ID card and OTS

Witness(es): Sgt Small & Berry

☐ Check if Offender Disciplinary Continuation Page, DOC 0316, is attached to describe additional facts, observations or witnesses.

Sgt Small 4021 Sgt Berry 2-5-14 1230 ☐ a.m. ☐ p.m.  
 Reporting Employee (Print Name) Badge # Signature Date Time

**Disciplinary Action:**

Shift Review: ☒ Temporary Confinement ☐ Investigative Status Reasons: nature of offense  
Rees 791 Major Rees 2-5-14  
 Printed Name and Badge # Shift Supervisor's Signature (For Transition Centers, Chief Administrative Officer) Date

Reviewing Officer's Decision: ☒ Confinement reviewed by Reviewing Officer Comment: I concur  
☒ Major Infraction, submitted for Hearing Investigator, if necessary and to Adjustment Committee  
☐ Minor Infraction, submitted to Program Unit  
Mr. Rees Major Rees 2-5-14  
 Print Reviewing Officer's Name and Badge # Reviewing Officer's Signature Date

☒ Hearing Investigator's Review Required (Adult Correctional Facility, Major Reports Only):  
Mr. Brown Mr. Brown 2/7/14  
 Print Hearing Investigator's Name and Badge # Hearing Investigator's Signature Date

Procedures Applicable to all Hearings on Investigative and Disciplinary Reports

You have the right to appear and present a written or oral statement or explanation concerning the charges. You may present relevant physical material such as records or documents.

Procedures Applicable to Hearings Conducted by the Adjustment Committee on Disciplinary Reports

You may ask that witnesses be interviewed and, if necessary and relevant, they may be called to testify during your hearing. You may ask that witnesses be questioned a long time as you suggest. You must indicate in advance of the hearing the witnesses you wish to have interviewed and specify what they could testify to by filling out the appropriate space on this form, leaving it off, and returning it to the Adjustment Committee. You may have staff assistance if you are unable to prepare a defense. You may request a reasonable extension of time to prepare for your hearing.

☒ Check if offender refused to sign

David Faria 9339 B. Lute  
 Serving Employee (Print Name) Badge # Signature  
2/6/14 4:40 ☐ a.m. ☒ p.m.  
 Date Served Time Served

☐ I hereby agree to waive 24-hour notice of charges prior to the disciplinary hearing.

Offender's Signature \_\_\_\_\_ ID# \_\_\_\_\_

(Detach and Return to the Adjustment Committee or Program Unit Prior to the Hearing)

Date of Disciplinary Report \_\_\_\_\_ Print Offender's Name \_\_\_\_\_ ID# \_\_\_\_\_

I am requesting that the Adjustment Committee or Program Unit consider calling the following witnesses regarding the Disciplinary Report of the above date.

Print Name of witness _____	Witness badge or ID# _____	Assigned Cell (if applicable) _____	Title (if applicable) _____
Witness can testify to: _____			
Print Name of witness _____	Witness badge or ID# _____	Assigned Cell (if applicable) _____	Title (if applicable) _____
Witness can testify to: _____			

ILLINOIS DEPARTMENT OF CORRECTIONS  
Offender Disciplinary Report

24-04

Type of Report: ☒ Disciplinary ☐ Investigative

Offender Name: Jose-Nicholas Osbaldo ID #: R72183

Observation Date: 2-5-14 Approximate Time: 11:15 a.m. Location: West Cell House

Offense(s): DR 504: 203. Drugs and Drugs Amphetamine, 202. Drugs or Mixture of Poisons

Observation: (NOTE: Each offense identified above must be substantiated) On the above date and approx. time this O/A was under going a routine shake down and found the following, 5 bottles of homemade intravenous "79% per intol unit" one needle in box #008881 one altered KTV, notified Sgt. Qualls and Lt. Payne. Identified by ID and and OTS, FOR

Witness(es): Snell 3147

☐ Check if Offender Disciplinary Continuation Page, DOC 0318, is attached to describe additional facts, observations or witnesses.

Reporting Employee (Print Name): Nathan Berry Badge #: 6861 Signature: Nathan Berry Date: 2-5-14 Time: 2:47 a.m.

Disciplinary Action:

Shift Review: ☒ Temporary Confinement ☐ Investigative Status Reasons: nature of offense

Printed Name and Badge #: Kees 791 Shift Supervisor's Signature: Mr. Kees Date: 2-5-14

Reviewing Officer's Decision: ☒ Confinement reviewed by Reviewing Officer Comment: I concur

☒ Major Infraction, submitted for Hearing Investigator, if necessary and to Adjustment Committee

☐ Minor Infraction, submitted to Program Unit

Print Reviewing Officer's Name and Badge #: Mr. L. D. F. 652 Reviewing Officer's Signature: Mr. L. D. F. Date: 2-5-14

☐ Hearing Investigator's Review Required (Adult Correctional Facility Non-Reports Only)

Print Hearing Investigator's Name and Badge #: Mr. Cowan Hearing Investigator's Signature: Mr. Cowan Date: 4/7/14

Procedures Applicable to all Hearings on Investigative and Disciplinary Reports

You have the right to appear and present a written or oral statement or explanation concerning the charges. You may present relevant physical material such as records or documents.

Procedures Applicable to Hearings Conducted by the Adjustment Committee on Disciplinary Reports

You may ask that witnesses be subpoenaed and, if necessary and relevant, they may be called to testify during your hearing. You may ask that witnesses be questioned along lines you suggest. You must indicate in advance of the hearing the witnesses you wish to have interviewed and specify what they could testify to by filling out the appropriate space on this form, tearing it off, and returning it to the Adjustment Committee. You may have staff assistance if you are unable to prepare a defense. You may request a reasonable extension of time to prepare for your hearing.

☒ Check if offender refused to sign

Offender's Signature: Bryan East ID #: 4339

Serving Employee (Print Name): Bryan East Signature: Bryan East

Date Served: 2/6/14 Time Served: 6:36 a.m.

☐ I hereby agree to waive 24-hour notice of charges prior to the disciplinary hearing.

Offender's Signature: \_\_\_\_\_ ID #: \_\_\_\_\_

(Detach and Return to the Adjustment Committee or Program Unit Prior to the Hearing)

Date of Disciplinary Report: \_\_\_\_\_ Print offender's name: \_\_\_\_\_ ID #: \_\_\_\_\_

I am requesting that the Adjustment Committee or Program Unit consider calling the following witnesses regarding the Disciplinary Report of the above date:

Print Name of witness	Witness badge or ID#	Assigned Cell (if applicable)	Title (if applicable)
Witness can testify to: _____			
Print Name of witness			
Witness badge or ID#			
Assigned Cell (if applicable)			
Title (if applicable)			
Witness can testify to: _____			